Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

_	(1)	(2) Annual Premium	(3) Percent		
	Coverage	Volume (Illinois) *	Change (+or-) **		
١.	Automobile Liability Private Passenger				
	Commercial				
-	Automobile Physical Damag				
	Private Passenger				
	Commercial				
3.	Liability Other Than Auto				
•	Burglary and Theft				
).	Glass				
	Fidelity				
	Surety				
	Boiler and Machinery				
0.	Fire				
0. 1.	Extended Coverage Inland Marine				
1. 2.	Homeowners				
<u>2</u> . 3.	Commercial Multi-Peril				
4.	Crop Hail				
5.	Other Medical Malpractice - Dentists	\$17,355	+15%		
Ψ.	Line of Insurance	417,000	+1076		
•	Does filing only apply to certain territory (territories) or certain Classes? If so,				
			es and only Classes I and II as they are		
	the only classes with premium and the only classes in which ACE has filed rates.				
	Brief description of filing. (If filing follows rates of an advisory Organization, specify				
	organization):	We are filing to raise rates	15% uniformly in the		
	Dentists program only.				
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.				
	rates.	ACF American Ins	urance Company		
		ACE American Insurance Company			

Name of Company

Official - Title

Robert Reilly - Vice President

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FORM (RF-3)

SUMMARY SHEET

Change in Company's pren	nium or rate level pro	duced by rate revision
effective June 1, 2015		

	<u> </u>					
- -	(1) Coverage -	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **			
1.	Automobile Liability Private	- Column (IIIII (IIIII)				
٠.	Passenger					
	Commercial					
2	Automobile Physical Damag					
2	· · · · · · · · · · · · · · · · · · ·		•			
	Private Passenger Commercial					
3.		\$30,297	2.549/			
	Liability Other Than Auto	\$30,297	-2.54%			
4. =	Burglary and Theft					
5.	Glass					
6. 7	Fidelity					
7.	Surety					
8.	Boiler and Machinery					
9.	Fire					
10.	Extended Coverage					
11.	Inland Marine					
12.	Homeowners					
13.	Commercial Multi-Peril					
14.	Crop Hail					
15.	Other Maica majractic					
	Life of Insurance					
•	Does filing only apply to certain territory (territories) or certain Classes? If so,					
	specify: Adjustm	ent to the Class 2 relativity.				
	Brief description of filing. (If filing follows rates of an advisory					
	Organization, specify					
	organization):	/				
	offering, addition of Naturopathic Medicine Physician and Chiropractic Treatment for Animals					
	charges, and other rating rule enha	ncements.				
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new					
	rates. Great Divide Insurance Company					
			ne of Company			
		Diane Cummings -				
		~~~	Official – Title			
			Anicial - Tille			